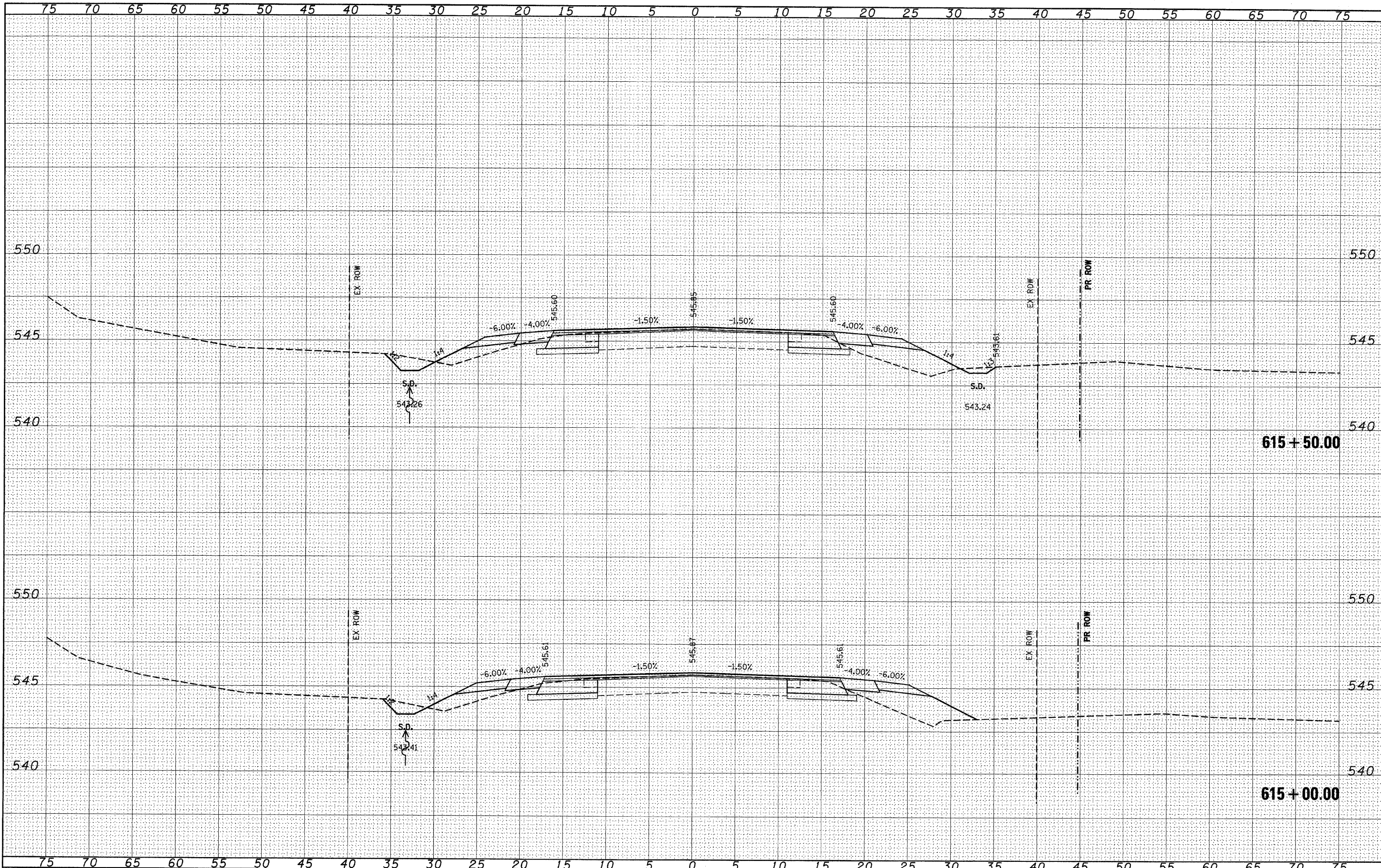


DATE _____ BY _____
 ORIGINAL SURVEYED SURVEY PLOTTED PLOTTED
 NOTE BOOK TEMPLATE TEMPLATE
 NO. AREAS CHECKED

DATE _____ BY _____
 ORIGINAL SURVEYED SURVEY PLOTTED PLOTTED
 NOTE BOOK TEMPLATE TEMPLATE
 NO. AREAS CHECKED



FILE NAME = #FILEL*
 USER NAME = #USER*
 PLOT SCALE = #SCALE*
 PLOT DATE = #DATE*

DESIGNED - ---	REVISED - ---
DRAWN - ---	REVISED - ---
CHECKED - ---	REVISED - ---
DATE - ---	REVISED - ---

**STATE OF ILLINOIS
 DEPARTMENT OF TRANSPORTATION**

IL 158
 SCALE: _____ SHEET NO. ___ OF ___ SHEETS STA. 615+00.00 TO STA. 615+50.00

F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
.809	(133)34RS-5.135RS-6	ST. CLAIR	762	640
				CONTRACT NO. 76A47

ILLINOIS FED. AID PROJECT